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**APPLICANTS**

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\*\* CONTINUING DATA \*\*\*\*\*

*None, ✓*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None, ✓***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 05/19/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 9	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>JL</i>	Initials			

**ADDRESS**

49474

**TITLE**

Selectively transmitting cache misses within coherence protocol

FILING FEE RECEIVED 1046	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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